

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>[Signature]</i>	32	2/12
FORMALITY REVIEW	<i>[Signature]</i>	5-11	02/27/01
RESPONSE FORMALITY REVIEW	<i>[Signature]</i>	1020	5-11-01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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02/27/01